

ORIGINAL

PTO/SB/83 (03-02)

Approved for use through 10/31/2002. OMB 0651-0035

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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT**

|                        |                    |
|------------------------|--------------------|
| Application Number     | 09/766402          |
| Filing Date            | 01/19/2001         |
| First Named Inventor   | Wyly Wade          |
| Group Art Unit         | 2176               |
| Examiner Name          | Heather R. Herndon |
| Attorney Docket Number | 39237/198174       |

To: Assistant Commissioner for Patents  
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Client has failed to pay one or more bills rendered by the practitioner for an unreasonable period of time. Client was notified that Kilpatrick Stockton LLP is withdrawing as counsel, was given time for employment of another practitioner, and has received all papers and property to which the client is entitled so that they may prosecute the applications themselves or seek other counsel.

I hereby apply on behalf of all attorneys at Kilpatrick Stockton LLP associated with customer no. 23370, to withdraw as attorney or agent for the above identified patent application and am authorized to act on behalf of all attorneys at Kilpatrick Stockton LLP.

1. ☐ The correspondence address is NOT affected by this withdrawal.  
2. ☒ Change the correspondence address and direct all future correspondence to:

**CORRESPONDENCE ADDRESS**

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OR

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ForeFront Technologies, Inc.

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☒ This request is made on behalf of myself and

☒ all the attorneys/agents of record,

☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or

☒ the attorneys/agents associated with Customer Number 23370

This request is enclosed in triplicate (including any attachments).

Name

Geoff L. Sutcliffe, Reg. No. 36,348

Signature

*Geoff Sutcliffe*

Date

9-3-02

**NOTE:** Withdrawal is effective when approved rather than when received.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.